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COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: KRINSKY FAMILY FOUNDATION INC.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: MORDECHAI LEBOVITS, CPA

Name (Printed or typed)

1514 EAST 36TH STREET

Address

BROOKLYN, NY 11234

City, State & Zip

347-268-8085

Daytime Telephone number

MORDECHAILEBOVITS@GMAIL.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: KRINSKY FAMILY FOUNDATION INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

2861 PINE TREE DRIVE

MIAMI BEACH, FL 33140

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THIS CORPORATION IS BEING FORMED WITH THE CHARITABLE PURPOSE TO ACCEPT FUNDS THAT WILL BE

DISTRIBUTED SOLELY TO CHARITABLE ORGANIZATIONS, OR USED SOLELY FOR CHARITABLE PURPOSES.

CHARITABLE PURPOSES SHALL INCLUDE RELIGIOUS, CHARITABLE, SCIENTIFIC OR LITERARY PURPOSES.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: AS PER BY LAWS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shmaya Krinsky, President

Address: 2861 Pine Tree Dr
Miami Beach FL, 33140

Name and Title: Yehudis Belkin, VP

Address: 2861 Pine Tree Dr
Miami Beach FL, 33140

Name and Title: Menachem Krinsky, VP

Address: 2861 Pine Tree Dr
Miami Beach FL 33140

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: Shmaya Krinsky _____

Address: 2861 Pine Tree Dr _____

Miami Beach FL, 33140 _____

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Shmaya Krinsky _____

Address: 2861 Pine Tree Dr _____

Miami Beach FL, 33140 _____

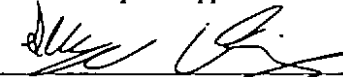
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity:




/ Required Signature of Registered Agent

11/20/20

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



/ Required Signature of Incorporator

11/20/20

Date

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